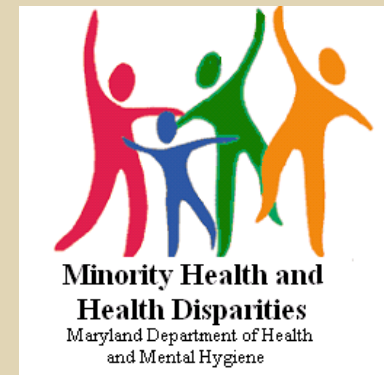


***Governor's Commission on Caribbean Affairs***  
**The Caribbean Market Place on Health and Well-Being**

***Caribbeans and Marylanders***  
***Moving to Health Equity***



***July 27, 2013***



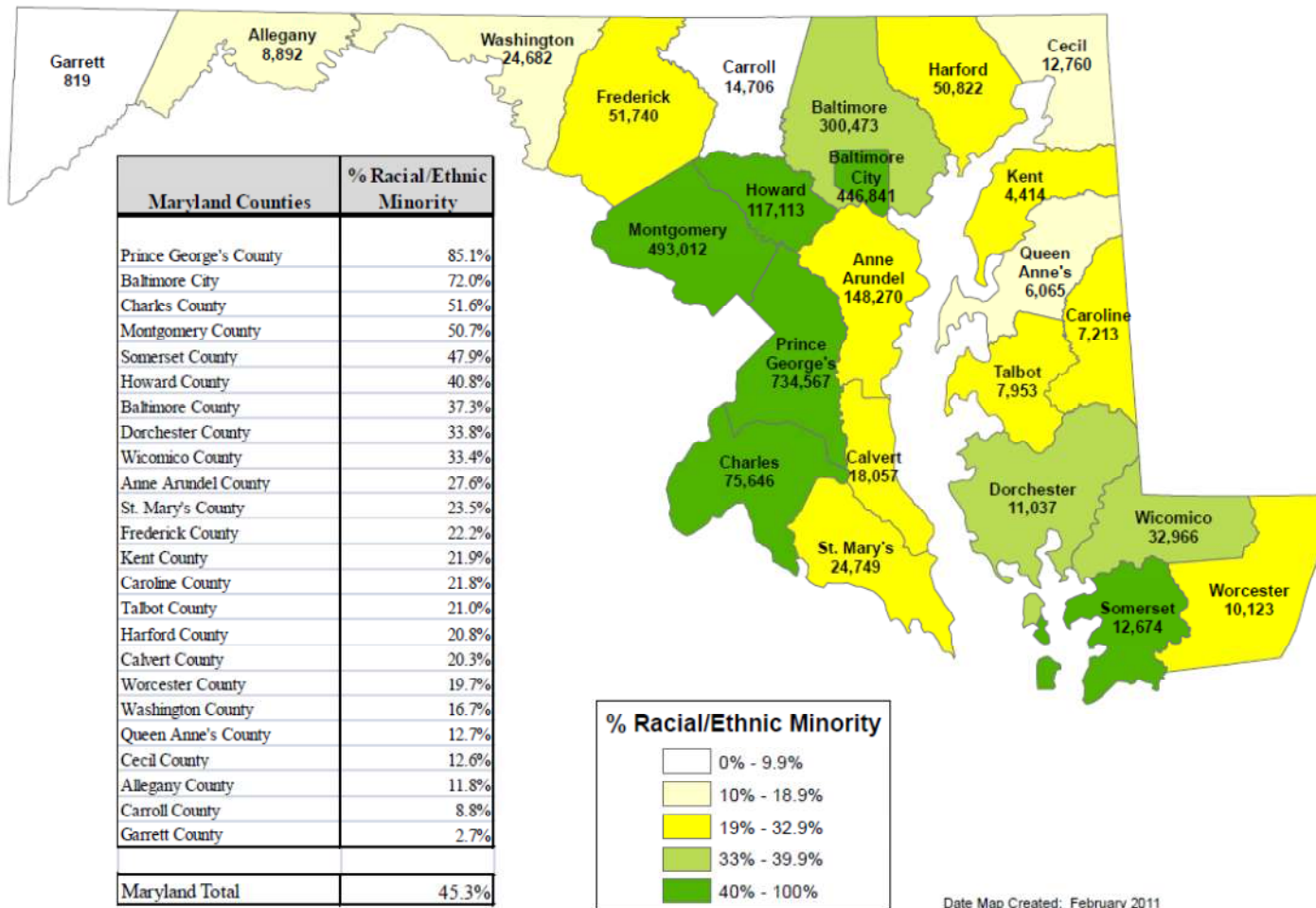
**Carlessia A. Hussein, RN, DrPH**  
Director,

Office of Minority Health and Health Disparities  
Maryland Department of Health and Mental Hygiene

# Maryland is One of the Most Racial/Ethnic Diverse States



Racial or Ethnic Minority Population (Number and Percent), by Jurisdiction, Maryland 2010



**45% minority**

**4 jurisdictions  
> 50% minority**

**6 jurisdictions  
> 40% minority**

**9 jurisdictions  
> 33% minority**

**out of 24  
jurisdictions**



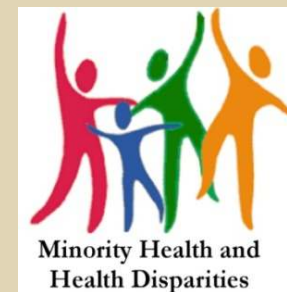
## Caribbean Ancestry in Maryland: Non-Hispanic



- Annual Surveys done from 2007 to 2011 by the Census Bureau (American Community Survey):
- Estimate 68,765 Marylanders of “West Indian” ancestry, “excluding Hispanic Origin Groups”
- This is 1.2% of Maryland’s population
- *The margin of error for this survey estimate is 3000 persons, so the true count could be as large as 71,765 or as small as 65,675.*
- *Subgroup data are only reported by Census Bureau for 2006 to 2010, so those years are on the following slides.*



# Caribbean Ancestry in Maryland By Group



## ***Non-Hispanic West Indians in Maryland 2006-2010***

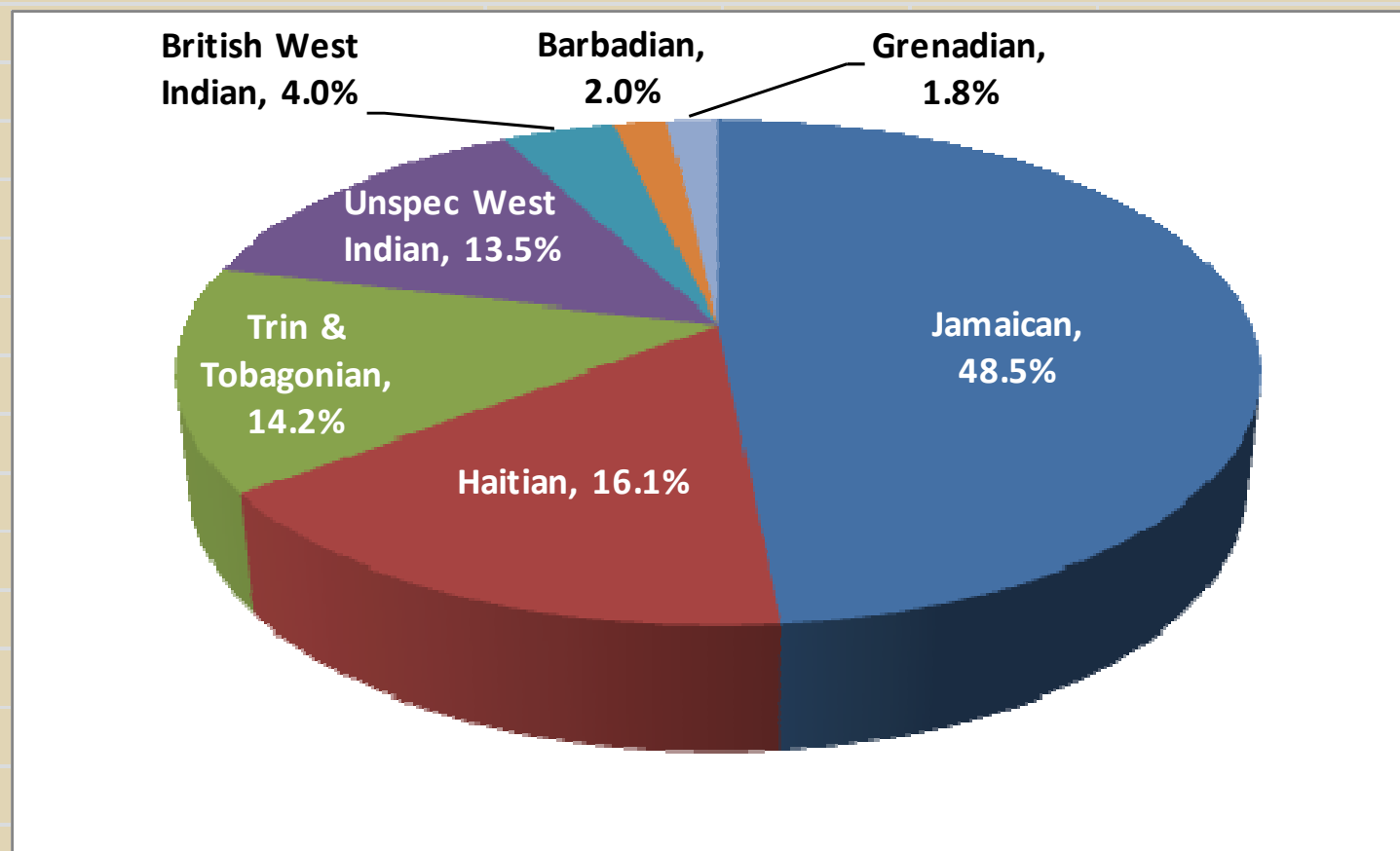
Jamaican	32,252	48.5%
Haitian	10,695	16.1%
Trinidadian & Tobagonian	9,471	14.2%
Unspec West Indian	8,974	13.5%
British West Indian	2,637	4.0%
Barbadian	1,314	2.0%
Grenadian	1,203	1.8%
SUM	66,546	
TOTAL NH West Indian	66,474	100.1%

***Data from the  
American  
Community  
Survey 2006 to  
2010.***

**Since the groups  
sum to more than  
100%, it means  
that some persons  
reported more  
than one ancestry**

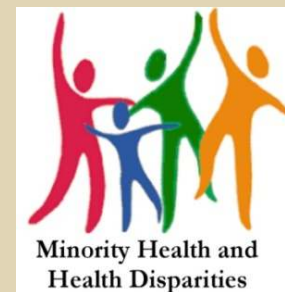
# Caribbean Ancestry in Maryland By Group

**Non-Hispanic Persons Reporting "West Indian" Ancestry, Maryland 2006-2010**  
(Source: *American Community Survey*)





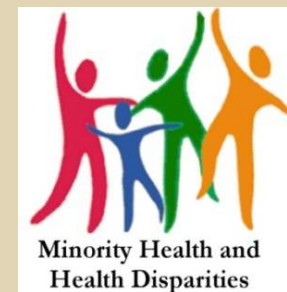
## Caribbean Ancestry in Maryland: Hispanics



- The prior data are Marylanders of “West Indian ancestry (excluding Hispanic Origin Groups)”
- In the American Community Survey, Hispanics from Puerto Rican, Cuban or Dominican Republic ancestry can be identified.
  - These results are presented on the next slide.
- We were unable to retrieve data on persons of Hispanic origin who have ancestry from other Caribbean locations.



## Caribbean Ancestry in Maryland: Hispanics



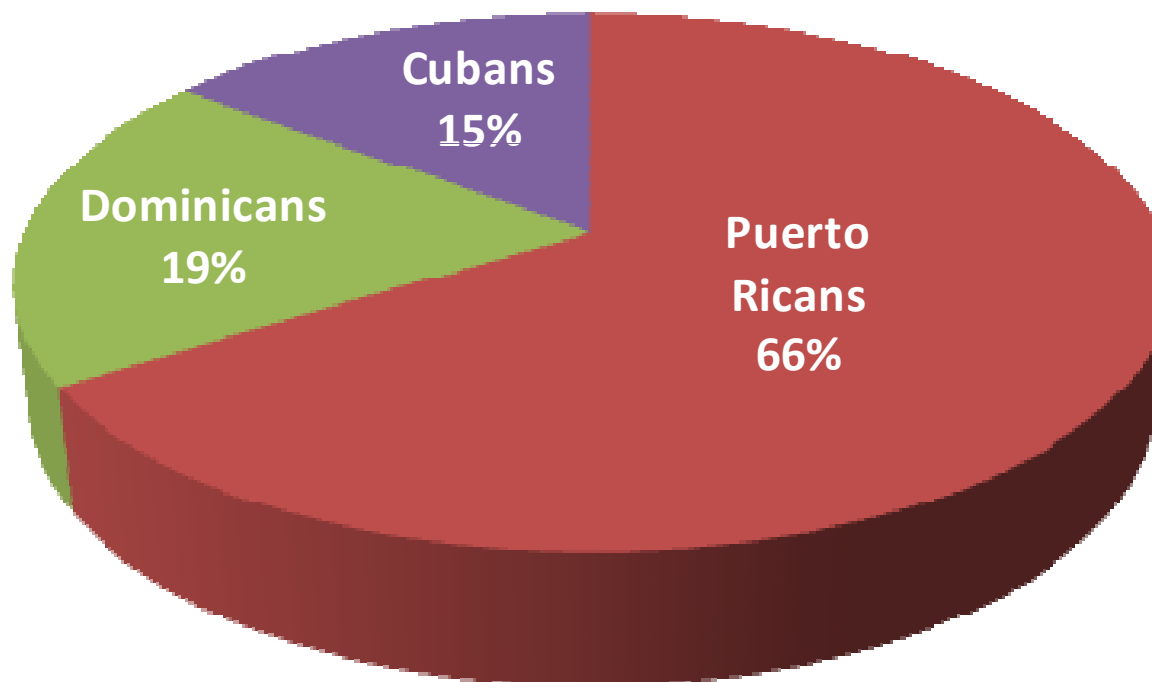
- **The American Community Survey 2006 to 2010:**
- **Estimated 63,345 Maryland Hispanics with Puerto Rican, Cuban or Dominican ancestry:**

– Puerto Rican	41,835	66%
– Dominican	12,180	19%
– Cuban	9,330	15%
- **This is 1.1% of Maryland population**
- **Hispanic plus Non-Hispanic Caribbeans are 2.3%**

# Caribbean Ancestry in Maryland: Hispanics

Persons with Hispanic Caribbean Ancestry, Maryland 2006-2010

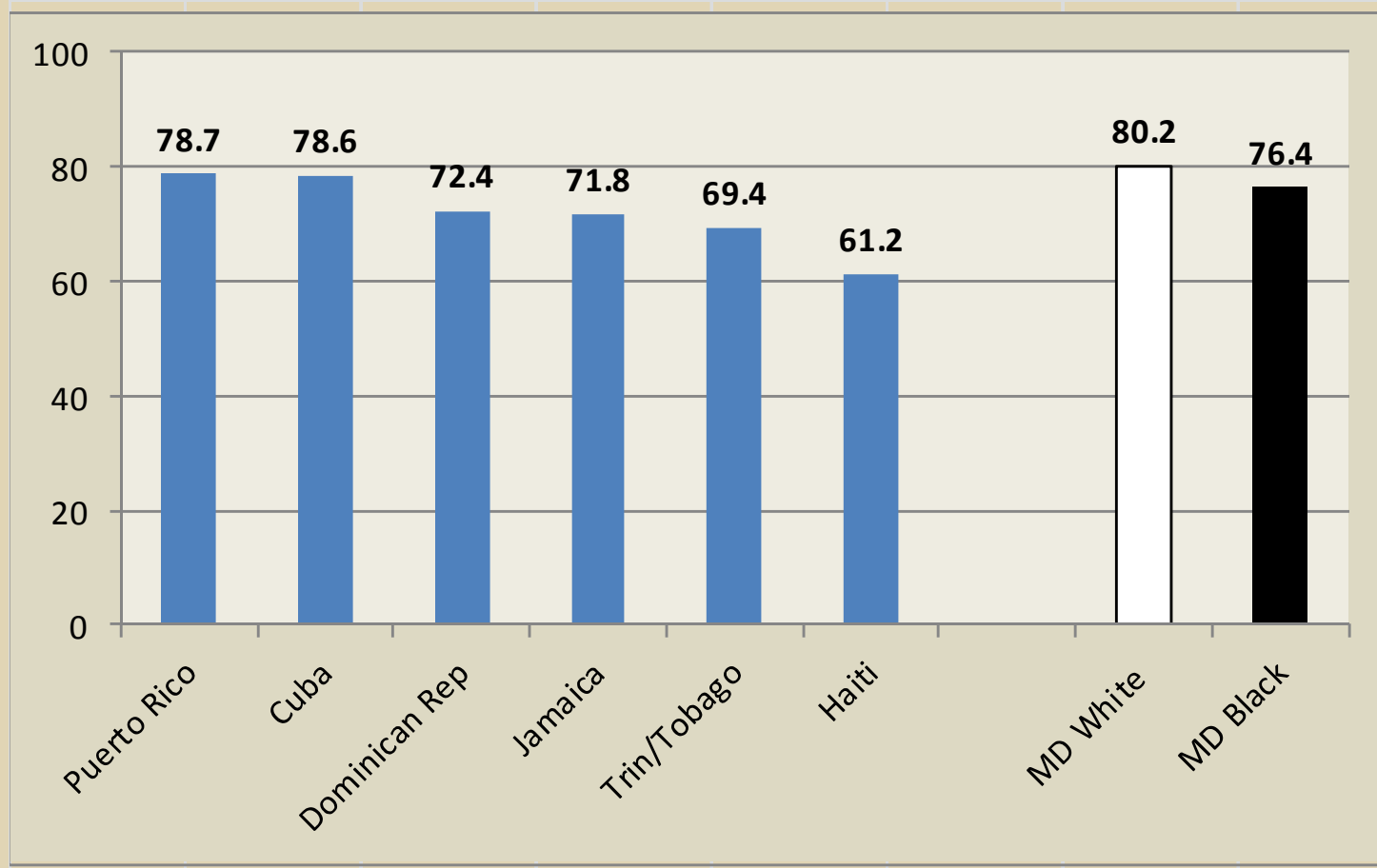
*(Source: American Community Survey)*





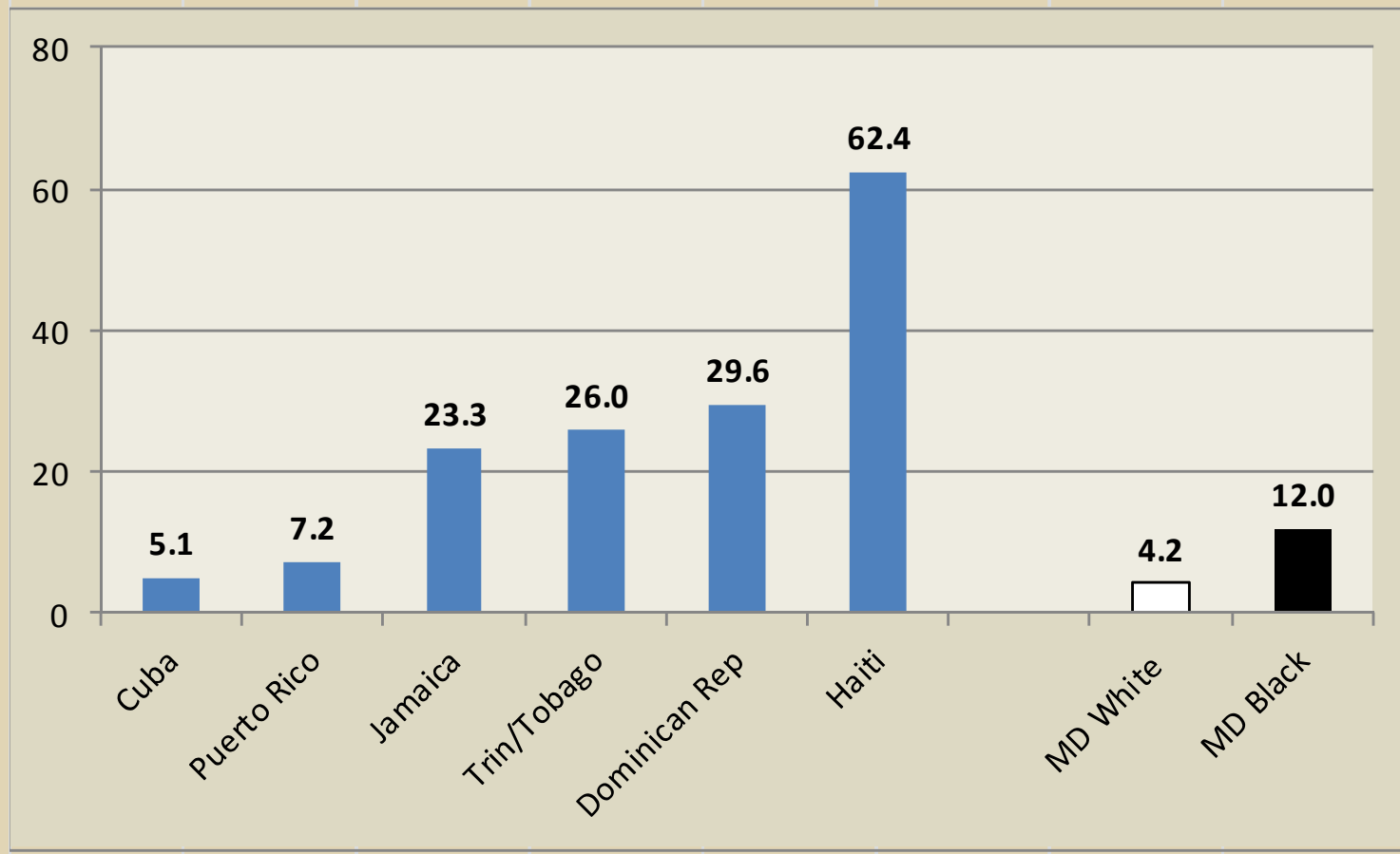
# Health in the Caribbean: Life Expectancy

**Years of Life Expectancy at Birth, Selected Caribbean Locations 2005-2010,  
Maryland Blacks and Whites 2010**



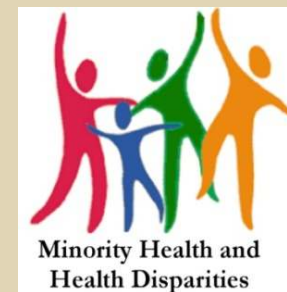
# Health in the Caribbean: Infant Mortality

**Infant Deaths per 1000 Live Births, Selected Caribbean Locations 2005-2010,  
Maryland Blacks and Whites 2010**





# Maryland Disparities by Race/Ethnic Group



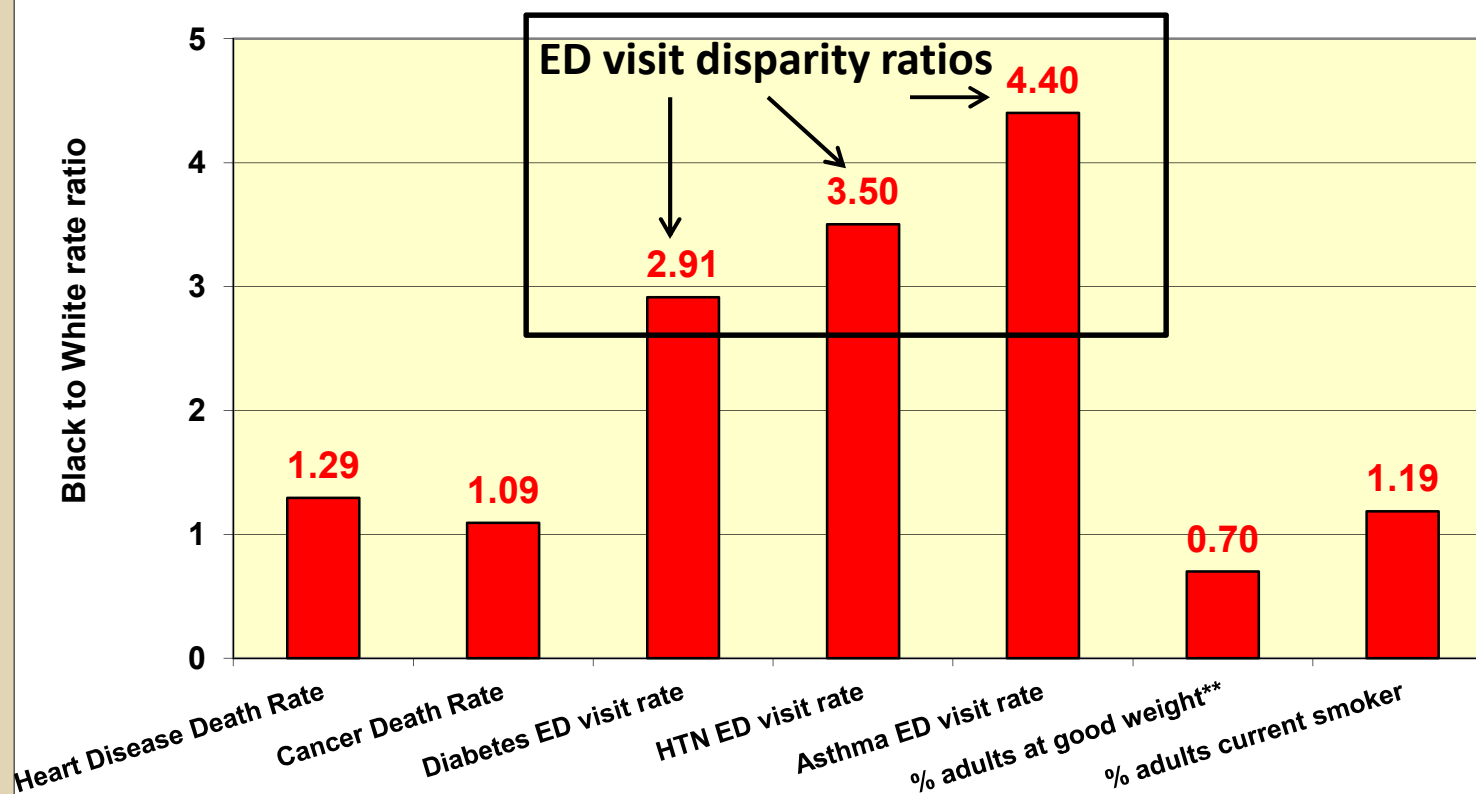
## Selected Racial and Ethnic Health Disparities in Maryland

*(Shows how many times higher the minority rate is compared to the White rate)*

	Infant mortality	Late pre-natal care	End-stage kidney disease	No health Insurance	New HIV case rate
<b>Black or African American</b>	2.8	1.8	3.0	2.1	11.8
<b>Asian or Pacific Islander</b>	0.8	0.9	1.3	1.4	0.5
<b>American Indian or Alaska Native</b>	2.2	1.1	3.0	<i>Not Reported</i>	2.2
<b>Hispanic or Latino</b>	0.9	2.1	1.3	5.4	3.6

# ED Visit Rate Disparities Black vs. White

**Black to White Rate Ratio for Selected Chronic  
Disease Metrics, Maryland SHIP data**



**(\*\*For % good weight, higher is better, so Blacks are 30% worse)**

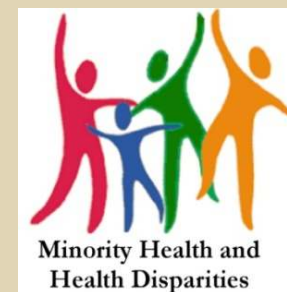
# Hospital Admission Rate Disparities Black vs. White



- *For Ambulatory Care Sensitive Conditions (or AHRQ Prevention Quality Indicators) for Maryland:*
- **Kid's Asthma:** **3.1 times higher**
- **Adult Asthma:** **2.7 times higher**
- **Adult Hypertension:** **4.5 times higher**
- **Adult Congest Heart Fail** **2.6 times higher**
- **Various Diabetes metrics** **2.6 x to 4.6 x higher**
- *(data from AHRQ State Snapshots as presented in the MHQCC Health Disparities Workgroup Report)*

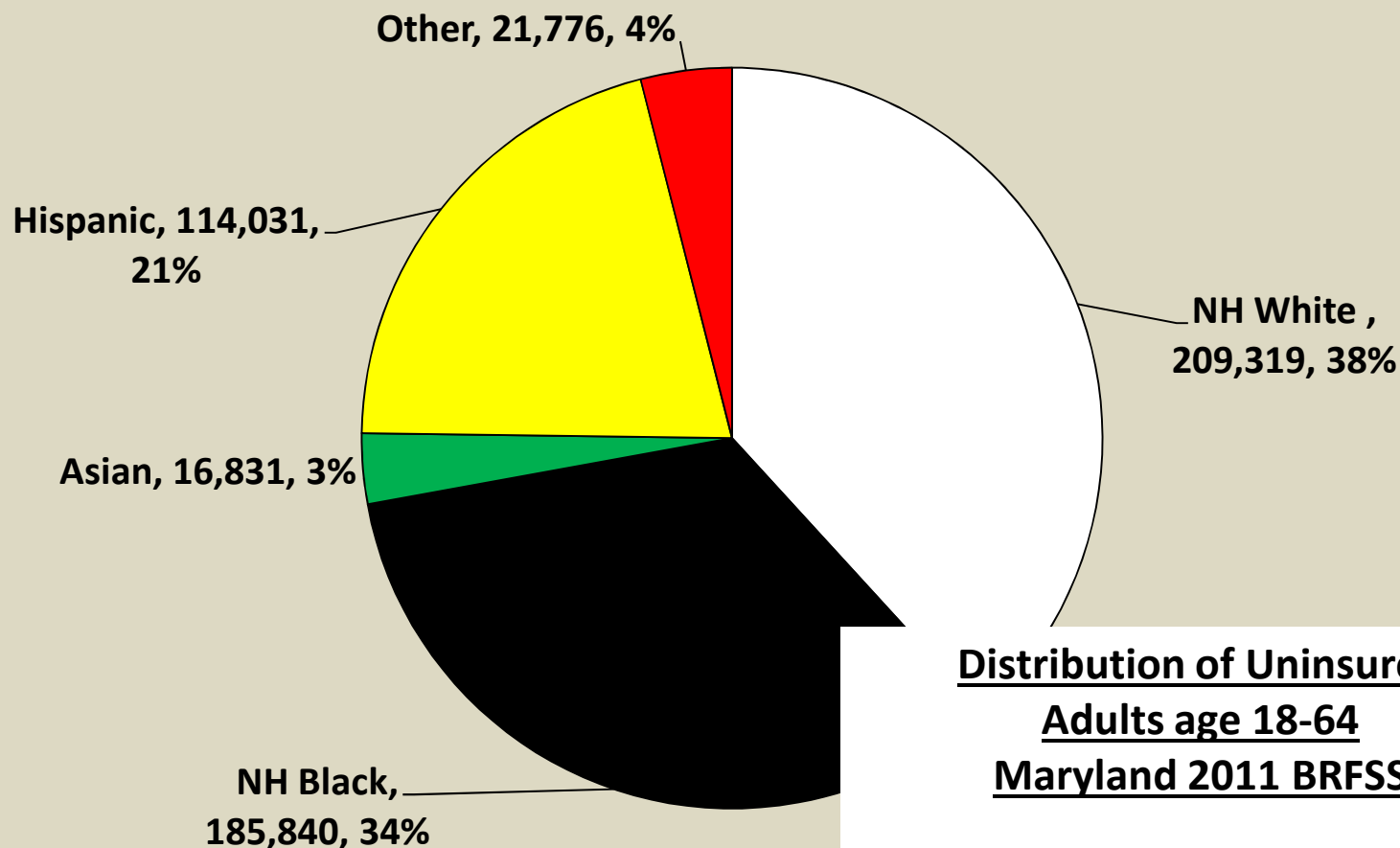


# **Cost of Disparities** **in Maryland**



- **Minority Health Disparities cost Maryland between 1 and 2 Billion Dollars per year of direct medical costs.**
- **Excess charges from Black/White hospitalization disparities alone were \$ 814 Million in 2011.**
  - *These are just the hospital charges , NOT including physician fees for hospital care, emergency department charges, or any outpatient costs.*

## Two-thirds of Maryland Uninsured Are Racial/Ethnic Minority





# **Maryland Health Benefit Exchange (Marketplace)**

- **Expands insurance for 730,000 Marylanders**
  - **13% of our population**
- **Expands Medicaid for all adults up to 138% of poverty level, Exchange has options for others:**
  - **Provides federal funds to help pay insurance premiums for individuals**
- **Single person - \$22,340 - \$117.29 per month, Individuals must pay the initial premium cost**



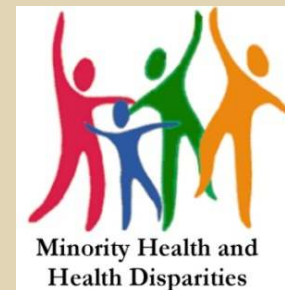


## **Maryland Health Benefit Exchange (Marketplace)**

- **Navigators and Assistors will assist enrollment,**
  - **on-line enrollment supported by direct assistance**
- **Open Enrollment 10/01/13 thru 3/31/14**
  - **Coverage begins January 1, 2014**
- **Small Business including non-profits (up to 50 employees) may participate; Tax credits available**
- **Large employers must offer insurance**
  - **Large employer mandate delayed until January 2015.**



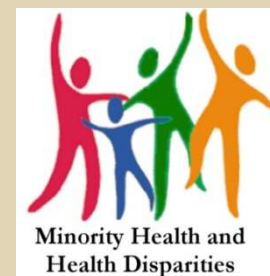
# **Health Enterprise Zones:** **Definition and Eligibility**



- **A Health Enterprise Zone was defined in law as**
  - **A contiguous area of one or more zip codes**
  - **Experiencing documented poor health outcomes and health disparities**
  - **Experiencing documented economic disadvantage**
- **Operationalized eligibility as**
  - **Bottom 50% on one of two poverty metrics, AND**
  - **Bottom 50% on one of two poor health metrics**



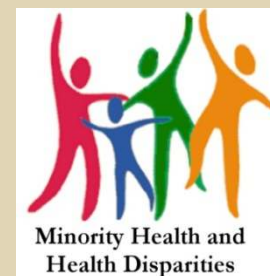
# **Health Enterprise Zones:** **Provider Incentives**



- **HEZ enabling legislation provides various statutory incentives for providers in the Zones:**
  - *State income tax credits*
  - *Hiring tax credits*
  - *Grants for equipment purchase or lease*
  - *Loan repayment assistance programs*
- **These are contingent on**
  - *Participating in cultural competency training*
  - *Accepting Medicaid and uninsured patients*
  - *Participating with the Coordinating Organization*



# **Health Enterprise Zones:** **Community Intervention**



- **HEZ enabling legislation provides grants for community-level public health interventions:**
  - *Deploying community health workers*
  - *Increasing availability of fresh fruits and vegetables*
  - *Improving access to safe physical activity*
  - *Transportation assistance programs*
  - *Mobile crisis teams for mental health*
  - *Providing cultural competency training*
  - *Supporting community coalitions*



# **Health Enterprise Zones:** **Principles for Proposals**



- **HEZ call for proposals contained 13 principles that doubled as proposal review criteria.**
- **Several key principles were:**
  - **Cultural, linguistic and health literacy competency**
  - **Workforce diversity**
  - **Outreach and targeting of minority populations**
  - **Racial, ethnic & language data collection/reporting**
  - **Addressing social determinants of health**
  - **Balance between provider and community focus**

# **Maryland Health Improvement & Disparities Reduction Act of 2012**



- *Health Enterprise Zones*
- Racial / ethnic data from insurers (MHCC)
- Racial / ethnic data for incentive programs:
  - Hospital incentives (HSCRC)
  - Patient-Centered Medical Homes (MHCC)
- Hospitals report efforts to reduce Disparities
- Health education institutions report efforts
- Cultural competency workgroup of Health Quality and Cost Council



# Selected DHMH Initiatives

- **State Innovation Models (SIM)** to develop the Community Integrated Medical Home (CIMH)
  - Integrate patient-centered care with enhanced capacity to improve and monitor health
  - Six month planning phase to submit 4-year grant request to implement a CIMH in Maryland.
- **Community Transformation Grant (CTG)** to expand tobacco cessation, active living, healthy eating and quality clinical & preventive services
  - CDC funds received to support 19 small jurisdictions in reducing chronic disease, promote healthy lifestyle and control health care spending.



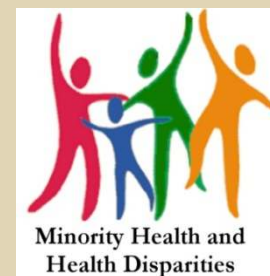
# **Selected DHMH Initiatives**

- **The State Health Improvement Process (SHIP)** supports local planning, identify community priorities, and take actions for change
  - Partnership between DHMH and state Hospital Association to support startup of Local Health Improvement Coalitions (LHIC)
  - The State SHIP identified 39 measures of health including 24 critical health disparities;
  - provides a model for population health planning and
  - an interactive website with data, planning tools and legal consultation.





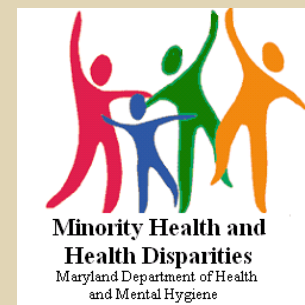
# **MHHD Initiatives**



- **Minority Outreach and Technical Assistance**
- **Cultural, Linguistic, Health Literacy Competency**
- **Disparities-Related Legislation**
- **Website, Data and Publications**
- **Health Disparities Collaborative**



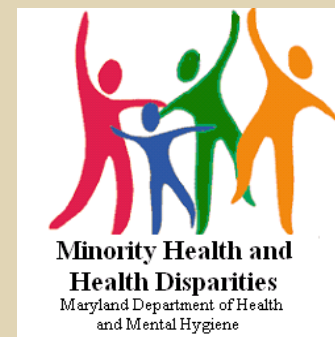
# Resources



- Maryland Health Benefit Exchange (MHBE)
  - <http://marylandhbe.com/>
- Community Transformation Grant (CTG)
  - <http://phpa.dhmmh.maryland.gov/cdp/SitePages/ctg.aspx>
- State Innovation Model (SIM)
  - <http://hsia.dhmmh.maryland.gov/SitePages/sim.aspx>
- State Health Improvement Process (SHIP)
  - <http://dhmmh.maryland.gov/ship2/SitePages/Home.aspx>



## **Contact Information**



### **Office of Minority Health and Health Disparities**

Maryland Department of Health and Mental Hygiene  
201 West Preston Street, Room 500  
Baltimore, Maryland 21201

Website: [www.dhmfh.maryland.gov/mhhd](http://www.dhmfh.maryland.gov/mhhd)

Health Disparities Plan:  
<http://dhmfh.maryland.gov/mhhd/Documents/Health%20Disparities%20Plan%202010.pdf>

Phone: 410-767-7117  
Fax: 410-333-5100

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